
Identifying Family Violence: A Community Prototype Incorporating Native Hawaiian Values and Practices

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Background

One of the major public health problems facing both the nation and Hawaii is family violence. The report entitled *Current Status of Training Programs in Hawaii for Health Professionals on the Assessment of Family Violence*, March 1995, written by Susan Maley, reiterated that family violence is a leading cause of physical and psychological trauma and death for both women and children. More than half of the children whose mothers are battered are also victims of physical abuse. Families who experience family violence seek health care eight times more frequently than the nonviolent families.

The Hawaiian community was significantly affected by the abuse of its women and children. Hawaiian women's exposure to family violence was higher than their percentage in the total population of the state - 13.5% of population vs. 20% of victims (State Commission on the Status of Women, 1993). *The Hawaii Kids Count Data Book*, 1994, also reported that Hawaiian children were more at risk of abuse than any other ethnic group and that the rate of child abuse is 33% higher than their percent of population (18% of child population vs. 27% of victims).

Response: Manual on Identifying Family Violence

In 1994, the Community Health Nursing Division and the Queen Emma Foundation became partners in the development of a training manual* to identify family violence in a culturally sensitive manner. Published in 1996, the purpose of this manual, *Identifying Family Violence: A Community Prototype Incorporating Native Hawaiian Values and Practices*, was to design an approach to improve the identification of family violence cases by health care professionals and to encourage disclosure by families within the native Hawaiian community.

Our assumption is that a culturally integrated approach is a necessary component of a community's strategy to address this escalating problem. This manual is a pioneering effort which health care professionals can adapt, expand, or refine in their work with native Hawaiians. However, we believe the values and practices described in the manual have universal application and can be incorporated in one's work with non-Hawaiians as well.

Basic Assumptions: Foundation of Manual

Assumptions which guided the development of this manual include the following:

About the Family

- Families are the foundation of a safer, non-violent society.
- Family members empower each other by practicing the true meaning of *aloha* on a daily basis.
- When any member of the family abuses another or is the object of abuse (spouse, children, elders, other dependent adults), the family's safety and ability to interact in the spirit of *aloha* is threatened.
- To preserve the *aloha* within the family and to create a safe environment for the rest of the members, they may need to physically remove themselves from the situation or may need to have the person inflicting pain removed from the home.
- The extended family may be able to provide *kokua* (help) so that all members have a safe place.
- Time away gives every family member an opportunity to rediscover the power within themselves and to regain control of their lives in a safe environment.
- Right actions occur when individuals within the family *ho o ponopono* "to make right" within themselves.

About Health Care Professionals

- Health care professionals are oftentimes the first persons in the community to whom a family will reach out.
- Health care professionals are in a pivotal position to discover, treat, and/or refer for help persons in family violence situations.
- When health care professionals approach family violence situations with an enlightened heart, their ability to help is enhanced.
- A health care professional develops an enlightened heart by engaging in practices that nourish his or her *aloha*.
- *Mana* is the spiritual life force which enables health care professionals to interact with others, including clients, in the true spirit of *aloha*.

About Cultural Integration

- A culturally sensitive and competent approach is recommended in family violence situations, particularly in Hawaii where the population is multicultural.
- The Hawaiian culture encompasses values and practices that can be applied universally to native Hawaiians as well as other populations.
- As the host culture, native Hawaiian principles, values, and practices should be incorporated into health care delivery for the benefit of our indigenous people.

*For information on obtaining the manual, contact Laura Armstrong, State of Hawaii, Department of Health, Community Health Nursing Division at 586-4131.

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About Pule (Prayer)

Throughout the manual, *pule* is used as a means of seeking divine empowerment, guidance and inspiration. Developing an understanding of one's spirituality is inherent in the process of using *pule*. Religion is often the bridge to understanding one's spirituality.

Pule is an essential part of the ho o pono pono "to make right" process when violence has occurred, since there is a disconnection of ones spiritual being from the physical.

The manual acknowledges all practices and beliefs which assist health care professionals and their clients in this process of deepening spirituality.

The Process: Hana Pono Ka Puuwai Malamalama (The Enlightened Heart Acts Accordingly)

Personal insights into one's principles, values, and practices and that of the client or family assist the health care professional in working with family violence. Effectiveness is enhanced when the health care professional is able to develop *aloha* with the presenting family member. This process, therefore, was designed to emphasize caring communication from an enlightened heart. Phases in this process include: 1) *pule wehe* (to prepare); 2) the interview: encouraging disclosure, 3) the examination, 4) closure, and 5) *pule hookuu* (to release).

I. Pule Wehe (to prepare)

Health care professionals are in a unique position to assist families in crisis. Oftentimes they are the first persons outside of the family to find out about the violence. In order to be there for a family, the health care professional must demonstrate *hana pono ka puuwai malamalama* (an enlightened heart acts accordingly).

Malamalama or enlightenment occurs when one is in touch with *mana* (spirit). *Malama* (caring) is the root of *malamalama* (enlightenment). Acting with an enlightened heart means:

Watching not only with the eyes, but with the heart; listening not only with the ears, but with the heart; speaking not only through the voice, but from the heart; thinking not only with the mind, but with the heart; doing not only what protocol dictates, but what the heart guides one to do.

II. The Interview: Encouraging Disclosure

During the interview, building *aloha* and establishing trust is critical. Building *aloha* involves creating a sense of time. Take advantage of the time you have to nourish the client's *mana* by building *aloha* and establishing trust; this will facilitate the client's ability to connect with his/her internal clock and spiritual knowledge of the *ohana* family. Each visit is an opportunity for the health care professional to encourage disclosure; express concern for the well-being of all family members; and provide information about the danger of the situation, resources, and options. Several visits may be required before the client is ready to transform the family situation.

Building *aloha* involves creating a sense of place. Regardless of the setting (emergency room, doctor's office, clinic, or home), the interview must be conducted in privacy. Have another professional meet with any accompanying spouse, partner, or other family member, or friend especially if they appear uncooperative. Call security only as a last resort, as this may increase the risk of later violent retaliation against the client.

Building *aloha* involves creating a sense of space. Enhance the client's spiritual space by, for example, having the client use *ha* (breath cycle) to decrease distraction, recite a *pule* together or send forth a *pule* to the client in silence. Enhance the client's mental space

by clarifying the purpose of the interview and what the client can expect from the health care professional; discuss confidentiality and its limits; avoid labeling. Enhance the client's emotional space by focusing on keeping self open in order to detect client concerns that remain un verbalized and to deal with any risks/dangers/fears; develop and use an assessment questionnaire as a routine tool to uncover family violence; be versatile in your interviewing approach.

III. The Examination

The examination is another opportunity to encourage disclosure. However, it is important to note that the examination also encompasses several medico-legal procedures which include:

Obtaining and documenting clearly and accurately the history of injury, conducting and documenting clearly and accurately the physical assessment, conducting and documenting clearly and accurately the emotional assessment, conducting and documenting clearly and accurately the assessment of present danger, collecting evidence, and treatment.

IV. Closure

The overall goals of establishing closure is to reinforce safety and empowerment by:

1. Reaffirming concern for the well-being of all family members.
2. Providing information about the danger of the situation, resources, and options.
3. Respecting the family member's chosen action.

V. Pule Hookuu: to release

After the client has left, the health care professional may make the transition to the next client by performing a cleansing ritual. As one is performing the handwashing ritual, consider reciting the following thought:

I am washing away any negativity or judgments attached to (name of client) and their situation. I, (health care professional), am cleansed, purified, and protected.

May all ties to (name of client) be cleansed and purified.

Remove all negative thoughts, emotions, and attachments whether known or unknown.

Summary

The manual, Identifying Family Violence: A Community Prototype Incorporating Native Hawaiian Values and Practices is a pioneering effort which health care professionals can adapt, expand, or refine in their work with Hawaiians and non-Hawaiians as well. Our assumption is that a culturally integrated approach is a necessary component of a community's strategy to address this escalating problem.

Family violence is a virus which threatens all of us. It weakens the *pohai ke aloha* (circle of *aloha*) which binds the family together. When the *pohai ke aloha* is weakened, each family member's *mana* (vital force) declines. When a family's *mana* is in decline, the *lokahi* (harmony) within the family and our community is disrupted.

We, as a community, a society, a nation, cannot afford to stand by and condone violence within the family. Ultimately, we all suffer when our families are hurting.

Hana pono ka puuwai malamalama.. An enlightened heart acts accordingly.